



250 Wood Road,
Annapolis, MD 21402-5050

Antiterrorism Individual Protective Measures Security While Traveling

AT ALL TIMES

- Vary eating establishments.
- Alternate shopping locations.
- Do not establish any sort of pattern!
- Avoid crowded areas
- Be specially alert exiting bars, restaurants, etc.
- Know how to use the local phone system and carry "telephone change".
- Know emergency phone numbers for police, ambulance, and hospital.
- Know location of US Embassy and other safe locations where you can find refuge or assistance.



BOMB INCIDENTS

- Be suspicious of objects found around the house, office, or car.
- Check mail and packages for -
 - * Unusual odors.
 - * Too much wrapping.
 - * Bulges, bumps, or odd shapes.
 - * No return or unfamiliar return address.
 - * Incorrect spelling or poor typing.
 - * Items sent "registered" or marked "personal".
 - * Protruding wires or strings.
 - * Unusually light or heavy packages.
- Isolate suspect letters or packages. Do not immerse them in water. Doing so may cause them to explode.
- Clear the area immediately.
- Notify your chain of command.

AT AIRPORT TERMINAL

- Use concealed bag tags.
- Spend as little time as possible in airports.
- Pass through the airport security checks quickly. Once through security, proceed to a lounge or other open area away from baggage lockers.
- If possible, sit with your back against a wall.
- Remain alert. Be a "People watcher."

AT HOTELS

- Do not give room number to strangers.
- Choose an inside hotel room.
- Sleep away from street side windows.
- Leave lights on when room is vacant.
- Pull curtains.
- Arrange knock signals.
- Answer telephone "hello". Do not use name and rank.
- Look before you exit.
- If confronted, have a plan of action ready.
- Occasionally exit/enter through the rear entrance.
- Keep your room key in your possession at all times.

FROM DOMICILE TO DUTY

- Alternate parking spaces.
- Lock car when unattended.
- Look for tampering. Look under your auto. Be alert when opening door.
- Keep gas tank at least half full.
- If possible, alter routes and avoid choke points.
- Plan "escape" route as you drive.
- Watch mopeds/cycles.
- Do not pick up hitchhikers.
- Drive with windows up and doors locked.

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SEPTEMBER 2001

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Coming Soon!

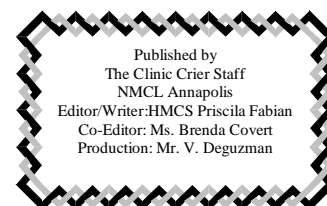
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CORRECTIONS: LT Zen-trich wrote the article, West Nile Virus published in last month's issue. LT F. McRae is the command's Infection Control Officer.



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Are We JCAHO Ready?

This is the last chapter we will discuss. This set of standards is on the **Management of Information (IM)**. This is a broad set of standards that covers several processes. The goal is to obtain, manage, and use information to improve patient outcomes. Information here is several different things. It is the medical record, which has all the information regarding the patient and their care. It is all the information contained in all the systems we use in the clinic; CHCS, MEPRS for workload data, and all the financial data systems in use. It is the log used for tracking PAP tests and mammograms. It is e-mail and the Internet, and how we use it to do our job of taking care of patients.

Information is a resource that must be managed effectively. Information is vital to a clinic's operations. It's used to care for patients and to assess the clinic's performance. The IM standards are designed to help manage the flow of the clinic's information. Compliance with these standards is crucial because every other chapter is rooted in the

collection, use, and control of information.

The organization must identify information needs, based on a thorough analysis. All the elements of information need to be considered. Who needs information? What information is needed and how much? What is the flow of that information? The appropriate technology has to be considered as well as how the information will be used. The organization has to demonstrate it has considered strategies for future growth, while addressing present information needs.

This set of standards contains all the standards that apply to the medical record. How are records maintained and secured? Documentation in the record must contain information to support the diagnosis, justify treatment, and promote continuity of care between providers. And is that information timely?

Policies and procedures must determine medical record content and completion, advance directive procedures, informed consent, ambulatory care and referral reports. The confidentiality and security of records, peer review policies, coding and retrieval systems, and record availability will be reviewed and evaluated.

Questions to ask yourself to determine

your readiness in Information Management:

- How do you maintain the security of computer systems
- How do you maintain the security of medical records?
- Do you have a medical record transport policy?
- What is your role in ensuring that the location of a medical record is known?
- What steps are followed in daily practice to ensure confidentiality of patient information obtained from computer systems?
- What do you do to ensure confidentiality of paper to be recycled that may contain patient care data?
- How do you manage the problem summary list?
- Do you have a policy on problem summary lists?
- Do you have a standard abbreviation list for the command?
- Is the abbreviation list available?
- Where is the evidence of the medical record review?

The goal champions for this chapter is LTJG Zahumensky in Medical Records and LTJG McCloud in Computer Services.

Mock Survey

We are required by BUMED to seek and

maintain Joint Commission Accreditation (JCAHO) every three years. We are also subject to periodic IG inspections. These two inspection groups have teamed up and combined their visits into one, week-long event. Our last JCAHO survey was March 1999 and we anticipate the triennial survey in early 2002. The surveys now have become "short notice". We will receive only 30 days notice prior to the JCAHO/IG survey. We pay several thousand dollars for

this survey and need to do as well as possible so we do not have to pay for a return visit.

We have invited CAPT David McCarthy, NC, USN, to do a mock survey for us on 15-16 October 2001. CAPT McCarthy is currently finishing a year long fellowship with JCAHO in Chicago and is superbly qualified to review our processes and evaluate our compliance with the standards.

The mock survey will be carried out as if this was the real thing. It is important that all staff participate and be prepared for CAPT McCarthy's visit to your area. Make

sure your departments are clean, neat, and organized. All equipment must be properly marked and in good working order. All staff members must have a Professional Development file that is current and addresses all the jobs performed by that member. Ensure all training is documented. You will be asked questions about your job, your spaces, your patients, how care is provided and what you are doing for performance improvement to improve care and patient outcomes.

Take this seriously and treat CAPT McCarthy as you would the JCAHO surveyor or the IG staff.



Captain Shore presented LCDR Rose Ebel the Navy Commendation Medal at a ceremony on 20 Sep 01.



Promotion of Captain Chris Daniel required the assistance of daughter Penelope, wife Lorraine and his father at a ceremony on 4 Sep 01.



Captain Shore presented LCDR Kimberly Wyatt the Navy Achievement Medal at a ceremony on 20 Sep 01.

MAY I HELP YOU?

**Command Customer Relations
Program Manager
LTJG Dawn Zahumensky, 293-1786**



Customer Relations Department/Clinic Representatives

Allergy/Immunizations Clinic: Mrs. Patrick (293-1153)
Mental Health Clinic: ETCM Lewis (293-1347)
Military Medicine Clinic: CDR Baker (293-1771)
Laboratory: LCDR Weisz (293-1210)
Occupational Health Clinic: Mrs. Patrick (293-1153)
Optometry Clinic: HM1 Davis (293-1130)
Orthopedic Clinic: HMCS Fabian (293-1748)
Patient Administration: Mrs. Robinson (293-1200)
Pediatric Clinic: LT Ramirez (293-1125)
Pharmacy: LT Yang (293-1157)
Physical Exams: HM2 Mack (293-1723)
Physical Therapy: HM1 Moesch (Bancroft Hall: 293-7907)
Preventive Medicine: LT Zentrich (293-1143)
Primary Care Clinic: Ms. Marianne Phillips (293-3612)
Radiology: HM2 Reynolds (293-1207)
Specialty Clinic: LT McRae (293-1345)

40th Annual Combined Federal Campaign (CFC)

A department CFC keyperson will be contacting each of you over the next few weeks providing you with the information you need to make your charitable donation. I thank you in advance for your generosity, especially in this time of critical need around the country.

A list of keypersons is as follows:

HM1 Correa - Laboratory
HM2 Czosnyka - Pharmacy
HM2 Doersom - Physical Therapy
HM2 Watson - Radiology
PC2 Palmer - Comptroller/Resources Dept.
HM3 Wilson - Orthopedics
HN Foltz - Pediatrics
HN Holm - Military Medicine
Dr. Held - Mental Health
PN3 King - Admin/Command Suite
Ms. Palmer - Managed Care
HM1 Davis - Optometry
Geraldine Patrick - Occupational Health
HM3 Foltz - Medical Record
HM1 Devalle - Professional Development

LT Lynch (3-1132)
Unit Campaign Manager
NMCL Annapolis

From the Ombudsman:

Summer seemed to be the time for change. New staff were coming on board and good friends were leaving. We all know that moving is not an easy thing, but were you aware that the Family Fleet and Service Center (FFSC) lets you borrow folding futons, playpens, and dish-ware? This may help your packing plans. Many of us try and leave these items out when we pack, but now you are able to send them out with the movers, while still having some of the comforts of home. (And don't forget to stop by Managed Care when checking out.)



Not looking forward to the summer being over? Unsure of whether you will be getting out of the house with your little ones once the cooler weather starts? Don't fret. Did you know that area businesses have free things for you and children to do? Here's a couple: Barnes and Noble bookstores have reading times and Zainy Brainy toy stores have toy times for kids.

Also, are there any spouses interested in starting a play group to meet once a month just to get out of the house during the fall/winter months? If so, please contact me at home, my phone number is (410) 267-6015. I was thinking about possibly meeting near the clinic and then giving your significant others a chance to meet up with you around lunch hour. If this sounds like a good idea to you, give me a call and we'll try to get it started.

Have you ever begun to wonder what the other spouses are doing when your husband/wife has to pull duty? It's you at home, or you with the kids, so what do you think about starting a get together for the spouses and children of our duty crews? It would be a great way to get to know new people, while getting out at the same time. Anyone interested please contact me at the number above so we can arrange starting this up.

Thanks for taking the time to read this article, and I hope that you will pass this along to the people at home. Looking forward to hearing from all of you!

Sincerely yours,
Carol



LT Selectees:
LTJG Dietz
LTJG Hayden
LTJG McCloud

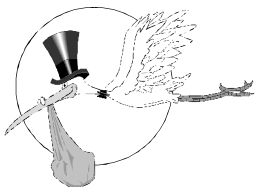


LCDR Newton - Optometry
LCDR Damstra - Military Medicine
LCDR Matthews - Sports Medicine
LT Bilik - Military Medicine
HM3 Oyewo - Laboratory



LT R. Gabel - DUINS
LCDR R. Toledano - CivLant
HM2 J. Klimczak - USNH Guam

HN Jesse Palacios
and YN3 Colleen
Taylor tied the
knot 21 August
2001



Joshua Ryan born to Ramona and Jim
Toledano 1 September 01



MA1 Green reenlisted by CAPT Shore, with HMCM Rang administering the reenlistment oath, as Mrs. Green looks on.



HMCS Williamson reenlisted by CAPT Deafenbaugh, with Michelle Williamson administering the reenlistment oath.



HMC Manning reenlisted by LCDR Wyatt



Awards recipients - August 2001



2001 Multi-Cultural Committee

Navy Fest 2001

I would like to extend my sincere thanks and appreciation to LT Ramirez and the following staff members who donated their personal time and energy to organize this year's Navy Fest which was held this past Saturday (9/22) afternoon.

HM2 Klimczak
HM2 Reynolds
HM2 Mack
HM3 Armour
HM3 Wilson
HM3 Hicks
HN Adkins

Even though our football team did not win, our NMCL Team scored big and a great time was had by all. The BBQ was exceptional; no one was observed going away hungry, and there was no lack of cold refreshments for all, before and after the game. Many of our old friends from the local area, PAX-River, BUMED, Bethesda, etc. attended and all extend their appreciation for a grand time. We would also like to thank the duty crew who stayed behind to cover the clinic ensuring that care was available to anyone in need. It was a team effort, and Naval Medical Clinic Annapolis demonstrated what being a team is all about.

Again, thanks to all for a "Job Well Done."

CAPT Shore